Agenda--First Friday Forum

New Holly Gathering Hall 7054 - 32nd Ave South, Seattle, WA 1/07/2011 9:00-11:00

9:00-9:15 Introductions

9:15-9:30 Community Health Network of Washington

Shawnna Connolly

Shawnna.Connolly@chpw.org

206.521.8833

9:30-9:50 DSHS Updates

Alice Liou

Alice.Liou@dshs.wa.gov

(360) 725-4676

Dody McAlpine

Mcalpineda@dshs.wa.gov

Karin Kramer

Karin.kramer@dshs.wa.gov

9:50-10:05 Basic Health Updates

Alyson Chase, Health Care Authority

Alyson.chase@hca.wa.gov

(360) 923-2765

10:05-10:30 Other resources for family health WithinReach

Sue Waldin

suew@withinreachwa.org

206.830.7646

10:30-10:40 Northwest Health Law Advocates

Janet Varon janet@nohla.org 206-325-6464

10:40-11:00 Other Updates/Announcements

http://www.kingcounty.gov/healthservices/health/personal/insurance/FFF.aspx

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News Release

December 30, 2010

NO. 010-110

FOR MORE INFORMATION:

Doug Porter, Administrator, Health Care Authority, State Medicaid Director, 360-725-1040 Preston Cody, Director, Division of Health Care Services and Basic Health, 360-412-4280 Jim Stevenson, Communications Director, MPA-HCA 360-725-1915 (pager 360-971-4067)

Some Medicaid program budget cuts avoided, but most adult clients will lose vision, hearing, dental services January 1

OLYMPIA – On Saturday, January 1, 2011, the Washington State Medicaid program will stop paying for a half-dozen categories of care, ranging from adult hearing aids and eyeglasses to non-emergency dental care for most adults and Medicare Part D drug co-pays for the disabled and the elderly.

Under Governor Chris Gregoire's budgets for this year and the coming biennium, the Medicaid program was able to restore the most heavily criticized of the cuts proposed last fall – adult prescription pharmacy services; family planning drugs and devices; adult hospice services; physical, occupational and speech therapy for adults; and dialysis, nursing home care and chemotherapy services for a small group of undocumented residents who would die without those treatments. All of those services will continue into 2011.

Doug Porter, Health Care Authority Administrator and State Medicaid Director, said he was grateful the Governor was able to rescind cuts impacting the most vulnerable populations in the state. But he noted that the state remains in a severe fiscal crisis and still faces budget cuts down the road.

In fact, another series of proposed health care cuts may begin on March 1, 2011, and even more cuts may be required to keep the state in the black in the new biennium, which begins on July1, 2011.

Effective January 1, here are the services that the Medicaid program will no longer reimburse providers for:

Adult Dental: Medicaid will only cover emergency medical and surgical treatment for adult clients (age 21 and older). There will continue to be a dental program for adult clients of the Division of Developmental Disabilities.

Adult Hearing: Includes hearing aids, cochlear implants, bone-anchored hearing aids, and repair of this equipment, parts or batteries. Audiology exams and medical treatment of the ear will still be covered.

Adult Podiatry: Medicaid will no longer reimburse for foot care that is not medically necessary to treat an acute condition.

Adult Vision: Medicaid will not pay for adult eyeglasses (frames and lenses), although eye exams and medical treatment of the eyes will still be covered.

Page 2: Medicaid budget cuts

School-Based Medical Services: Medicaid will no longer reimburse school districts for health care-related services included in a Medicaid enrolled child's Individualized Education Program (IEP). Under federal law, these services are the responsibility of school districts.

Medicare Part D Co-pays: The state will no longer pick up the cost of small prescription copays that range from \$1 to \$6.30 for Medicaid clients who are also Medicare subscribers.

On March 1, another series of proposed health-care budget cuts could be imposed:

Children's Health Program: Medicaid is expected to terminate medical coverage for 27,000 children on March 1. The families meet medical income eligibility but don't qualify for other reasons.

Interpreter services: This program, proposed for termination on March 1, currently provides medically certified interpreters for English-deficient Medicaid clients.

Medical Care for Disability Lifeline and ADATSA: Effective March I, medical services would end in the Disability Lifeline Program, previously known as General Assistance – Unemployable (GA-U), and the Alcohol and Drug Addiction Treatment and Support Act, also known as ADATSA.

Basic Health: Approximately 56,000 Washington residents are now covered by this subsidized plan and pay premiums on a sliding scale. Another 130,000 individuals are on a waiting list.

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EDITORS NOTE: Here are Medicaid cuts that were originally proposed but later restored in the Governor's supplemental and biennial budgets:

- Adult pharmacy: This cut would have eliminated coverage for outpatient prescription drugs provided by a retail pharmacy for all adult clients (age 21 and older).
- Adult hospice: This program provides skilled nursing care for end-of-life.
- Adult Outpatient Physical, Occupational, Speech therapies will continue for all adult clients.
- Take Charge Family Planning: Program is available for incomes under 200 percent of the Federal Poverty Level. Medicaid also will continue family planning services for a full year post pregnancies.
- State Alien Medical (AM): Provides cancer, dialysis and nursing home coverage for a small group of non-citizens.
- First Steps/Maternity Support Services/Infant Case Management/Childbirth Education: Funding to assist high-risk mothers before and after birth will continue, but funding will be cut by 50 percent.

EDITORS: More information is available on the Medicaid budget website:

http://hrsa.dshs.wa.gov/News/Budget.htm

TANF Changes: 5 Year Limit

DSHS HAS AMENDED THE RULES FOR PEOPLE WHO HAVE BEEN ON TANF/SFA FOR 60 MONTHS EFFECTIVE FEBRUARY 1, 2011

What does this mean for families that have been on for 60 months?

> Families will lose their TANF benefits if they have been on for 60 months in their lifetime, unless they qualify for an exemption or a hardship exception.

What are the exemptions?

- You are an older adult care taker relative (over 55 years old, are caring for a child, and you are not the child's parent OR
- You are an adult with a severe and chronic disability OR
- You are required to be in the home to care for a child with special needs OR
- > You are required to be in the home to care for another disabled adult

What are the hardship extensions?

- You have an open child welfare case with the state and this is the first time that you have had a child that is a dependent of the state OR
- You are working in unsubsidized employment for 32 hours or more per week OR
- You can document that you are victim of family violence and you are working with domestic violence services.

WHAT SHOULD I DO IF I THINK I QUALIFY FOR AN EXEMPTION OR HARDSHIP EXTENSION?

- 1. YOU SHOULD IMMEDIAELY CONTACT YOUR DSHS CASE MANAGER OR SOCIAL WORKER
 - DSHS case managers and social workers review cases and determine if a person meets one of the exemptions or hardship extensions
- 2. If you think you qualify for an exemption or hardship extension you have a right to appeal the termination If your benefits are scheduled to end January 31, 2011 YOU HAVE ONLY UNTIL JANUARY 31ST TO FILE your appeal if you want to keep getting benefits until the hearing decision. You can still file an appeal later, within 90 days of the notice, but you won't keep your benefits while you wait.' IF YOU LOSE YOUR HEARING
 - Any continued benefits will stop, and you may have to repay benefits. You will not have to repay
 more than 2 months of the continued cash benefits.

HOW TO FILE A TIMELY APPEAL

- Best way: Go in person to the local DSHS office. Turn in a written hearing request. Keep a copy. Have DSHS stamp your copy with the date received by DSHS. Keep this as your proof.
- Next best way: Call DSHS Be sure to speak to a person (not just a voicemail box). Get the person's name.
 Write down the name, the date and time. Keep this as your proof. Ask for a fair hearing for your benefit termination. Ask the worker to make the written request to the hearings office for you.
- Another way: Fax, and mail the original the same day. Use the fax number and address on the hearing form.
 Keep a copy. Keep your proof of fax (fax transmittal). This is safer if you can mail it certified mail, return receipt.
- Call Office of Administrative Hearings for King County call the Seattle Office at (206) 389-3400

SEEK LEGAL HELP

- In King County: Call 2-1-1 or Solid Ground at 206-694-6742
- In all other counties: Call CLEAR at 1-888-201-1014 (Monday-Friday, 9:15 a.m. to 12:15 p.m.)

WASHINGTON STATE CHILD CARE SUBSIDY ELIGIBILITY CHART

(Working Connections Child Care and Seasonal Child Care)

Effective October 1, 2010

Family Size 🛶 🧸 🥌	Maximum Countable Income (175% FPG)
1 (child only case)	\$1580
2	\$2125
3	\$2671
4	\$3217
5	\$3761
6	\$4307
7	\$4853
8	\$5397
9	\$5943
10	\$6489

State Medical Assistance Services Cuts in Early 2011

<u>Last revised December 29, 2010</u>

The Washington State government is making cuts in several public benefit programs during 2011 to address a budget crisis.

Below is a summary of the current medical program cuts situation. It includes suggested steps to prevent or reduce harm.

A. Who will lose services?

Most definite and proposed service cuts will apply to all adults who get medical coverage through the Department of Social and Health Services (DSHS). One cut will affect some senior and disabled adults on Medicaid who get prescription drug coverage through Medicare Part D Another will reduce services for people who get home care. under COPES or Medicaid Personal. Care. The Governor also proposes to eliminate entire medical programs in March for certain children, Basic Health enrollees, and people who receive Disability Lifeline (DL U, formerly called "GA-U") and ADATSA, the addiction. treatment program.

B. When will cuts occur?

Some cuts will go into effect on January 1, 2011. Others are proposed to take effect March 1 or July 1. The Legislature may alter these or enact still other cuts at any time after the Legislature begins to meet on January 10, 2011.

C. What medical services will (and won't) be taken away?

Some things have changed since DSHS originally announced cuts in early December. More changes may come. For up-to-date information in this changing situation, check http://hrsa.dshs.wa.gov/News/Budget.htm. We will update this publication when we get new information.

Known cuts as of January 1:

- "Non-emergency" dental services (including dentures) for adults, except for adults served by the DSHS Division of Developmental Disabilities. The extent of "emergency services" still covered is unknown,
- Hearing aids, cochlear implants, batteries, and repairs for adults.
- Vision aids (glasses and contact lenses) for adults.
- Non-emergency foot care (podiatry) for adults. Services for certain acute conditions are still covered. People who need medically necessary foot care that is not on DSHS's list of preapproved acute care procedures may be able to apply for coverage through a request for an "Exception to Rule."

However, DSHS will still consider prior authorization requests for the above services filed through the end of December, and those approved by 12/31/10 may be completed in 2011. See page 3 for more information.

No longer being cut March 1:

 Outpatient prescription drugs for adults (other than copayment assistance as described above).

D. Why are things so uncertain?

Washington passed a balanced twoyear budget to begin July 1, 2009. After that, projected expenses rose and revenues fell. To address the shortfall, the Legislature can pass a supplemental budget, the Governor can use her emergency powers to order reductions, and DSHS can make cuts that don't require action by the Legislature.

The Legislature passed one supplemental budget, but a shortfall remains. The Legislature will meet beginning in January to make further budget changes to cover the shortfall through June 30, 2011. The Legislature will also decide on a budget for July 1, 2011–June 30, 2013. The 2011 session will end in May unless extended.

E. What can you do right now to prevent or reduce problems getting health care?

Take steps to get the DSHS care you need:

 Make sure all service requests for prior authorization by DSHS are submitted by December 31, 2010.

Some dental, vision, hearing, and foot care services must be approved by DSHS prior to being covered. DSHS has clarified that:

- It will cover services that were or are approved by December 31, 2010 for the full authorization period stated in any approval letter.
- It will complete action on all prior authorization requests submitted by midnight on December 31, 2010
- Therefore, DSHS will cover payment for services approved by December 31, 2010 and those requested by that date but approved later, even if service isn't completed until 2011.

 Unless DSHS gives prior authorization (see above), it will deny payment for any service of the kinds that will be cut on December 31, 2010 that are billed with a date of service on or after January 1, 2011.

As of December 29, it is not clear whether DSHS will cover services or procedures that do not require prior authorization and that begin but are not completed by December 31 (for example, additional therapy visits that are automatically available beyond the general minimum, but only if a person has specific medical conditions).

Make sure you are working with your providers to get services completed or authorization requests made before December 31!!!

2. If you are on Disability Lifeline (DL), ADATSA, Basic Health, or the state-funded children's health program, see if you can qualify for Medicaid. This may allow you to have medical coverage even if your current program is eliminated in March. Also, for adults, Medicaid also covers some services that

continue to be covered in full. Before doing that, contact legal services to explore all options.

If you are on COPES and live in assisted living or an adult family home, ask your DSHS financial workers to offset copayment expenses against your share of the costs. DSHS ordinarily subtracts copayments only from "participation." Lower income clients, however, pay only "room and board." DSHS may make exceptions to subtract these expenses from "room and board" charges also, especially if the expenses could force you to move to a nursing home in order to pay for medications.

Sources for help with prescription drug access issues:

If you may not be able to afford one or more prescription drugs following this change, your local State Health Insurance Benefits Advisors (SHIBA) programs (1-800-562-6900) or Senior Information and Assistance may be able to suggest options.

Social service providers working with clients who will have particular difficulty with this change may wish to consult with the legal service provider funded through the local Area Agency on Aging.

Other resources to explore if your program is proposed to end in March

The Washington Health Program is a low-cost alternative coverage through the state's Health Care Authority. For more information, see http://www.washingtonhealth.hca.wa.go v/.

The Washington Prescription Drug Program offers savings of up to 60% on some drugs. For more information, see www.rx.wa.gov or call 1-800-913-4146.

F. What can I do once a service is actually cut off?

So far, DSHS has not mailed clients letters correcting the now-outdated list of cuts that it mailed December 6. DSHS has not announced whether a corrected letter will go out.

The December 6 letter says that DSHS clients have no right to a hearing to challenge loss of services because of these cuts. But state law says that anyone who feels "aggrieved" (harmed) by a DSHS decision that affects benefits has a right to *request* a hearing and argue that point if and when DSHS objects to the request. For example, you may have a right to hearing if DSHS does not notify a person properly, if it stops a service in the middle of a time period that DSHS authorized, or if there is some reason why DSHS's new policy violates other state or federal law.

DSHS or the Office of Administrative Hearings (OAH) must receive your hearing request within 90 days of the date that DSHS mailed you notice that they were cutting off a service. To have a chance of continuing to get that service while you wait for your hearing, DSHS or OAH must receive your request within 10 days after the notice date or before the date the service will be cut, whichever is later.

You may request a hearing by doing any one of the following:

 Go in person to the local DSHS office and turn in a written







- · Education at accredited institutions in Washington
- · Mental Health Counseling with licensed mental health professionals
- · Health Care Insurance Premiums for current health coverage
- · Physical, Dental, Vision and Hearing for exams and treatment

Education

The WWIN Education Grant provides assistance for tuition and books at accredited institutions in the state of Washington. The WWIN grant is the last funding source applied to tuition and book expenses, after all federal and private grants and scholarships. This means that women will only be eligible for WWIN funding if other grants and scholarships received do not fully cover costs of tuition and books. The WWIN Education Grant funds up to \$10,000 over two years for low income women throughout

the State of Washington and applicants are selected based on financial criteria, a balanced distribution among the schools, and the order in which the application was received.

In order to apply, women must be enrolled in the school of their choice and have completed the federal financial aid (FAFSA) form. WWIN can fund any level of degree or vocational certification through a Bachelor's degree. In order to receive funding, students must maintain at least a 2.5 grade point average and be eligible for in-state tuition at accredited institutions. We also recommend that you sign up with TheWashBoard.org to learn if you might be eligible for additional scholarships and grants.

Counseling

WWIN's Mental Health Counseling Grant covers up to 24 sessions of therapy with the licensed mental health professional of the client's choice during a period of up to one year. Grantees may choose how often to schedule therapy sessions and whether individual or group counseling sessions are preferred. The coverage rate is paid per counseling session, and grantees are responsible for charges that exceed the coverage rate.

Health Care Insurance Premiums

WWIN's Health Care Insurance Premium Program provides assistance for the payment of monthly premiums for clients who have health insurance. WWIN does not provide health insurance, but rather pays monthly premiums for one year on the client's behalf up to a specified maximum. In addition, the grant covers up to \$1,000 in co-pays or co-insurance and deductibles for doctor visits. The grant assists with coverage for the individual woman only, and does not cover prescription drugs.

Physical, Dental, Vision and Hearing

The Physical, Dental, Vision and Hearing Grant provides assistance to low income women across Washington State and covers a wide range of dental services and basic physical/vision/hearing screening exams. This grant covers up to \$3,000 over a six month period for approved medical services and can also be used for expenses related to eyeglasses or hearing aids. A grant recipient can see the professional of her choice, and can see more than one professional if necessary. Among the physical services covered are mammograms, eye exams, hearing exams, and yearly physicals, in addition to many restorative dental procedures. The dental grant does not cover tooth whitening or veneers, braces, or implants.

Due to the great demand for dental services, and the limited resources for low income dental coverage

Counseling

Mental Health Counseling grant application screenings are available every **SECOND Tuesday** of the month (**December 14, January 11, February 8**) from **12pm-1 pm**. During that time please call **425-451-8838 extension 305** to be connected to a trained staff member who will ask questions to screen you for eligibility. You may need to call more than once to get through. The number of applications is limited so if the available applications have already been given out by the time you call, the greeting will be changed to reflect the status. If you appear to be eligible after the initial screening WWIN will send you an application for you to fill out completely and promptly return. Applications will only be available by this procedure.

Health Care Insurance Premiums

Insurance Premium grant application screenings are available every *FIRST Tuesday* of the month (**December 7, January 4, February 1**) from **12pm-1pm**. During that time please call 425-451-8838 extension 305 to be connected to a trained staff member who will ask questions to screen you for eligibility. You may need to call more than once to get through. The number of applications is limited so if the available applications have already been given out by the time you call, the greeting will be changed to reflect the status. If you do not get through one month you are welcome to call again the following month. If you appear to be eligible after the initial screening WWIN will send you an application for you to fill out completely and promptly return. Applications will only be available by this procedure.

Education:

Our next grant opening will be sometime in June or July 2011 for funding Fall 2011 classes and forward. Please check this website closer to that time to find out exact dates. The applications will be available on our website for two days only. You will need to have been accepted to a school that accepts Federal Financial Aid and have filled out a FAFSA prior to applying. There will be one page of the application that your school will need to fill out so we recommend that you be on campus when you print out the application. Once received by WWIN, complete applications are processed on a first come first served basis. If your application is processed, WWIN will call you on the telephone to do a phone screening. If you appear to be eligible after the initial screening you will need to come into our office in Bellevue for an in person interview. Applications will only be available by this procedure. We also recommend that you sign up with TheWashBoard.org to learn if you might eligible for additional scholarships and grants.

Physical, Dental, Vision and Hearing

Our next opening will be January 18th and 19th between the hours of 9 AM and 3 PM. During that time period you may call 425-451-8838 extension 307, a message call-line that will be available only during the grant opening. There will be detailed instructions on the information you will need to leave. Typically, we request that you provide your name, address, phone number, and information from your most recent tax return and then a selection is made by a random drawing for applications to be mailed out for you to fill out completely and promptly return. You will only be contacted if your name is selected. Applications will only be available by this procedure. If you



DEPARTMENT OF SOCIAL AND HEALTH SERVICES STATE OF WASHINGTON

Medicaid Purchasing Administration 626 8th Avenue, S.E. P.O. Box 45502 Olympia, Washington 98501-5502

December 17, 2010

<u>.</u> Health Care Authority and Medicaid Purchasing Administration stakeholders

FROM: Doug Porter, HCA Administrator and State Medicaid Director

SUBJECT:

Governor's Supplemental Budget Recommendations for Medicaid

program, and she made it clear she is asking the Legislature to restore three more in July 2011. Gregoire announced she was restoring six of the most painful proposed budget cuts in the Medicaid In a grim budget year, Medicaid received some good news on Friday, December 17. Governor

The six budget cuts that were restored were:

- Adult (age 21 and older) pharmacy benefits will not be suspended on March 1, 2011.
- The Take Charge family planning program will not end on March 1, 2011.
- The adult hospice benefit will not end on January 1, 2011. Adult physical, occupational and speech therapies will not end on January 1, 2011.
- The State Alien Medical (AM) program will not end on January 1, 2011
- program will be retooled to match a 50 percent cut in funding The First Steps/Maternity Support Services program will not end on March 1, but the

pregnant women legislators to restore the Adult Dental benefit in July for aged, blind and disabled populations and In addition, Governor Gregoire made it clear she is recommending that the Legislature restore the Adult Hearing and Adult Vision benefits in July, when the new biennium begins. She also asked

Medical assistance programs that still will be cut include:

- .The Children's Health Program --with an enrollment of 27,000 children -- will end on March Adult Dental will end on January 1, 2011, for most adult clients. The exception will be
- Many foot care (podiatry) services will end on January 1, 2011. Foot care that will continue clients with developmental disabilities
- Medicaid's participation in school-based medical services (primarily physical, occupational will be treatments necessary for acute conditions. and speech therapy) will end on January 1, 2011. Those services are expected to continue

but be funded by school districts

December 15, 2010 Message for HCA and MPA stakeholders

-more

- Adult vision will no longer provide eyeglass frames, lenses and contacts after January I,
- Adult hearing will no longer provide hearing aids, other equipment or repairs after January
- The Interpreter Services program is scheduled to end on March 1.
- The medical coverage and cash grants for clients of the Disability Lifeline program formerly known as the General Assistance-Unemployable - and ADATSA are now scheduled to end on March 1.

Order 10-04, which was issued on September 13, 2010, and authorized by RCW 43.88110(7). All of the cuts listed above were proposed by the Medicaid program as a consequence of Executive

to end Disability Lifeline, the Basic Health plan, the Children's Health Program may be easier for January 1, 2011, to go into effect as listed. Other cuts - including the Governor's recommendation recommendations or to change them. However, we expect the budget cuts listed as starting on It is important to note that the Legislature has the authority to ignore the Governor's legislators to change given their delayed effective dates.

vulnerable clients whose medicines are literally life-preserving Medicaid program. It would have been unprecedented and extremely risky for some of the most The pharmacy cut, which would have required Medicaid to stop paying for adult clients' prescription medicine, was heavily opposed by providers, stakeholders and clients – as well as the

90-10 federal-state match, as well as the physical, occupational and speech therapies, adult dental vision and hearing services. There also was harsh criticism of cutting the Take Charge family planning benefit, which enjoys a

budget website beginning today: http://hrsa.dshs.wa.gov/News/Budget.htm recommendations today and next week, and additional implementation details will be posted on our What happens next? Our budget staff will begin the task of analyzing the Governor's full budget

subscribe by visiting the site at https://fortress.wa.gov/dshs/hrsalistsrvsignup/ billing instructions and provider memos for the cuts that go into effect January 1, 2011. You can Providers also are encouraged to subscribe to the Medicaid provider listsery in order to receive new

As I said earlier this week after the Governor unveiled her Biennial Budget recommendations, thank you for your help and past support of the Medicaid program and the Health Care Authority. We will need your help even more in the months to come